

29
02/12/01

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|-----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 18 | 125-131 |
| FORMALITY REVIEW | H-S | 866 | 02-13-001 |
| RESPONSE FORMALITY REVIEW | 8/2/01 | 1091 | 5-24-01 |
| | | 707 | 7-9-01 |

INDEX OF CLAIMS

- ✓ Rejected
- = Allowed
- (Through numeral) ... Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

| Claim | Date |
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| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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